



PTO/SB/17 (10-08)

Approved for use through 09/30/2010. OMB 0651-0032

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL		Application Number	10/572,793-Conf. #3407
For FY 2009		Filing Date	March 21, 2006
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		First Named Inventor	Yoshihiko Kuroki
TOTAL AMOUNT OF PAYMENT (\$ 940.00)		Examiner Name	I. Sadio
		Art Unit	2629
		Attorney Docket No.	SON-3400

METHOD OF PAYMENT (check all that apply)					
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____					
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: <u>18-0013</u>		Deposit Account Name: <u>Rader, Fishman & Grauer PLLC</u>			
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)					
<input checked="" type="checkbox"/> Charge fee(s) indicated below			<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee		
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17			<input checked="" type="checkbox"/> Credit any overpayments		

FEES CALCULATION															
1. BASIC FILING, SEARCH, AND EXAMINATION FEES															
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES										
	Fee (\$)	Small Entity	Fee (\$)	Small Entity	Fee (\$)	Small Entity									
Utility	330	165	540	270	220	110									
Design	220	110	100	50	140	70									
Plant	220	110	330	165	170	85									
Reissue	330	165	540	270	650	325									
Provisional	220	110	0	0	0	0									
2. EXCESS CLAIM FEES															
Fee Description															
Each claim over 20 (including Reissues) Small Entity Fee (\$) Fee (\$)															
52 26															
Each independent claim over 3 (including Reissues) Fee (\$) Fee (\$)															
220 110															
Multiple dependent claims Fee (\$) Fee (\$)															
390 195															
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Total Claims</td> <td style="width: 30%;">Extra Claims</td> <td style="width: 30%;">Fee (\$)</td> </tr> <tr> <td style="text-align: center;">18</td> <td style="text-align: center;">- 32 or HP</td> <td style="text-align: center;">0</td> </tr> <tr> <td colspan="3" style="text-align: center;">$\times 52.00 = 0.00$</td> </tr> </table>							Total Claims	Extra Claims	Fee (\$)	18	- 32 or HP	0	$\times 52.00 = 0.00$		
Total Claims	Extra Claims	Fee (\$)													
18	- 32 or HP	0													
$\times 52.00 = 0.00$															
HP = highest number of total claims paid for, if greater than 20.															
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Indep. Claims</td> <td style="width: 30%;">Extra Claims</td> <td style="width: 30%;">Fee (\$)</td> </tr> <tr> <td style="text-align: center;">6</td> <td style="text-align: center;">- 6 or HP</td> <td style="text-align: center;">0</td> </tr> <tr> <td colspan="3" style="text-align: center;">$\times 220.00 = 0.00$</td> </tr> </table>							Indep. Claims	Extra Claims	Fee (\$)	6	- 6 or HP	0	$\times 220.00 = 0.00$		
Indep. Claims	Extra Claims	Fee (\$)													
6	- 6 or HP	0													
$\times 220.00 = 0.00$															
HP = highest number of independent claims paid for, if greater than 3.															
3. APPLICATION SIZE FEE															
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).															
<table border="1" style="width: 100%;"> <tr> <td style="width: 30%;">Total Sheets</td> <td style="width: 30%;">Extra Sheets</td> <td style="width: 30%;">Number of each additional 50 or fraction thereof</td> </tr> <tr> <td style="text-align: center;">- 100 =</td> <td style="text-align: center;">/50 =</td> <td style="text-align: center;">(round up to a whole number) \times _____ = _____</td> </tr> </table>							Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	- 100 =	/50 =	(round up to a whole number) \times _____ = _____			
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof													
- 100 =	/50 =	(round up to a whole number) \times _____ = _____													
4. OTHER FEE(S)															
Non-English Specification, \$130 fee (no small entity discount) Fees Paid (\$)															
Other (e.g., late filing surcharge): 1251 Extension for response within first month 130.00															
1801 Request for Continued Examination 810.00															

SUBMITTED BY				
Signature			Registration No. (Attorney/Agent)	40,290
Name (Print/Type)	Christopher M. Tobin		Telephone	(202) 955-3750
			Date	April 27, 2011